



**COUNTY OF SAN DIEGO**  
**DEPARTMENT OF PLANNING AND LAND USE: Zoning**  
**CONDITION SATISFACTION RESUBMITAL FORM**

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Project Name: \_\_\_\_\_

Project Number: \_\_\_\_\_

Has The Financial Responsibility Changed?    YES ☐                      NO ☐

Point of Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant's E-Mail Address: \_\_\_\_\_

**The following are required attachments to the Condition Satisfaction Resubmittal Form:**

- ☐ Evidence of compliance with Condition *(Please refer to the condition(s) language for specific evidence that will be required in order to satisfy the condition(s)).*
- ☐ **If the proposed condition(s) have not been highlighted, the submittal cannot be accepted.**
- ☐ List the Condition Numbers: \_\_\_\_\_  
Customer Comments: \_\_\_\_\_

\_\_\_\_\_  
*Print or type Name*

\_\_\_\_\_  
*Signature*

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**FOR DEPARTMENT USE ONLY**

For Questions Contact: PERMIT COMPLIANCE COORDINATOR, (858) 694-3011

Kiva Project Number: \_\_\_\_\_

Is this a FEE Account?    YES ☐                      NO ☐

Is This a Deposit Account? YES ☐                      If Yes, KIVA ACCOUNT #: \_\_\_\_\_

Technician Comments: \_\_\_\_\_

\_\_\_\_\_  
*Technician's Name*                      *Date*



DPLU-242 (11/09)